*Purpose of this document*

*This document is to be used to submit a request for a CAS project.*

*Instructions:*

*All sections are to be completed.*

*The request must be authorized by the CAS Coordinator*

*The request must be submitted by hard copy (with a written signature)*

**Student information**

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| --- |
| Project Name: |
| Date Submitted: |
| Priority:  **High**  **Medium**  **Low** |
| Person Submitting form: |

**Project Description**

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| --- | --- | --- |
| **Strand of CAS:** | **Creativity** | **Service** |
| **Activity** |  |

**Project Purpose**

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**Background: Why does this project interest you?**

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|  |

**Supporting Evidence (include interviews, research about other projects that are similar, websites)**

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**Mentors/Advisors/Advocates that will help you with your project, Names and contact information**

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**Major Potential Benefits**

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**Anticipated Outcomes and Key Indicators of Success**

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**Which of the 7 learning outcomes will be addressed?**

|  |  |
| --- | --- |
| 1. Identify own strengths and develop areas for growth |  |
| 2. Demonstrate that challenges have been undertaken, developing new skills in the process |  |
| 3. Demonstrate how to initiate and plan a CAS project |  |
| 4. Show commitment and perseverance in the CAS experience |  |
| 5. Demonstrate the skills and recognize the benefits of working collaboratively |  |
| 6. Demonstrate engagement with issues of global significance |  |
| 7. Recognize and consider the ethics of choices and actions |  |
| 8. Develop new skills |  |

**Project Funding**

|  |  |
| --- | --- |
| Has a budget been determined? |  |
| If known, indicate the budget amount required. |  |
| Source of funding for this project |  |

**CAS Coordinator Approval**

|  |  |
| --- | --- |
| **CAS Coordinator:** | |
| **Signature:** | **Date:** |